TAX		Doll	ars	Cents
18 Enter amount from line 17	18			. 0 0
19 Enter Low Income Tax Credit from worksheet in the instructio	ns 19			. 0 0
20 Subtract line 19 from line 18	20			. 0 0
21 Enter Child and Dependent Care Credit from federal Form 2441, line 9 ➤	x 20% (.20) 21			. 0 0
22 Income Tax Liability. Subtract line 21 from line 20. If line 21 e.				. 0 0
23 Enter KENTUCKY USE TAX from worksheet in the instructions ≥ 23				. 0 0
24 Add lines 22 and 23. This is your Total Tax Liability	24			0 0
25 (a) Enter Kentucky income tax withheld	21	· · · · · · · · · · · · · · · · · · ·		
as shown on attached 2000 wage and tax statements	. 00			
(b) Enter 2000 Kentucky estimated tax payments	. 00			
26 Add lines 25(a) and 25(b)	26			. 0 0
27 If line 26 is larger than line 24, enter AMOUNT OVERPAID (see				. 0 0
See instructions for a detailed description of funds.	➤ (Enter amount(s) checked)			
28 Nature and Wildlife Fund Contribution	20			
\$2 \$5 \$10 Other	0.0			
\$2 \$4 Other				
Fund Contribution				
31 Veterans' Program Trust Fund Contribution	. 31			
32 Add lines 28 through 31	32		*	. 0 0
33 Amount of line 27 to be CREDITED to your 2001 ESTIMATED T	AX 33			. 0 0
34 Subtract lines 32 and 33 from line 27. Amount to be REFUNDE	D TO YOU REFUND 34			. 0 0
TAX PAYMENT SUMMARY		-		
35 If line 24 is larger than line 26, enter ADDITIONAL TAX DUE	35			. 00
36 (a) 2210-K (c) Late pa		v		
penalty penalty				
Check if Form 2210-K attached (d) Late fill penalty	, <u> </u>			
	es 36(a) through 36(d). ere 36(e)			. 0 0
37 Add lines 35 and 36(e) and enter here. This is the AMOUNT Y 0	OU OWE OWE 37			. 00
Make check payable to Kentucky State Treasurer . Write your Social				
Tax—2000" on the check. Place on top of wage and tax statement:				
Attach a complete copy of federal Form 1040 if you received	Do you wish to receive a pa	acket nevt		
farm, business, or rental income or loss.	year, or do you need only a	a name	Packet	Label
If you are not required to attach a copy of your federal return, check here▶	and address label for filing 2001 return? (check one)	,		
I, the undersigned, declare under penalties of perjury that I have exami				
of my knowledge and belief, it is true, correct and complete. I also und Regulation 103 KAR 17:020 will result in refunds being made payable to this return.				
a				
Your Signature (If joint or combined return, both must sign.) Spouse's Signature	ure Date Signed			
Typed or Printed Name of Preparer Other than Taxpayer I.D. Nu	mber of Preparer Date	Telep	Telephone Number (daytime)	
42A7400023 Mail to: REFUNDS K	antucky Doyanua Cahinat Frank	fort VV 40410 00	104	
	entucky Revenue Cabinet, Frank			
PAYMENTS Kentucky Revenue Cabinet, Frankfort, KY 40619-0008.				